

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
DECLARATION AND POWER OF ATTORNEY**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

HARD MASK REMOVAL

the specification of which is attached hereto, unless the following box is checked:

☐ which was filed on _____,
and assigned serial number _____.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. § 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. §§ 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below any foreign application for patent or inventor's certificate or PCT international application having a filing date before that of the application on which priority is claimed:

			Priority claimed <input type="checkbox"/>	Certified Copy <input type="checkbox"/>
_____ Application number	_____ Country	_____ Filing date		

I hereby claim the benefit under 35 U.S.C. § 199(e) of any United States Provisional application listed below:

_____ Application number	_____ Filing date
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I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s), or § 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. § 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

_____ Application number	_____ Filing date	_____ Patent number, if applicable
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I hereby appoint the following attorneys, with full power of substitution and revocation, to prosecute this application and any other applications based thereon and to transact all business in the United States Patent and Trademark Office and any other competent international authorities in connection therewith:

ATTORNEY	REG. #	ATTORNEY	REG. #
Andrew S. Neely	28,979	Mark P. Crockett	47,507
Mark S. Graham	32,355	J. David Gonce	47,601
Robert O. Fox	34,165	Michael T. Lukon	48,164
David E. LaRose	34,369	Leo J. Peters	33,562
Geoffrey D. Kressin	28,730	Timothy Croll	36,771
Michael E. Sellers	39,831	Sandeep Jaggi	43,331
Rick Barnes	39,596		

and request that all correspondence and telephone calls in respect to this application be directed to:

CUSTOMER NUMBER 24,319

LSI LOGIC CORPORATION
Intellectual Property Department
1551 McCarthy Boulevard, MS D-106
Milpitas CA 95035

Phone 1.408.954.4923
Fax 1.408.433.7460

Attorney docket: 01-558

I hereby authorize the attorneys named herein to accept and follow instructions from **LSI Logic Corporation** as to any action to be taken in the Patent and Trademark Office regarding this application without direct communication between the attorneys and myself. I hereby waive any right to revoke such power of attorney and appoint substitute attorneys, and grant all such powers to **LSI Logic Corporation**.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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Full name of inventor:

Venkatesh Gopinath

7/04/03

Date

P. G. Venkatesh

Inventor's signature

Residence:

47636 Pima Street, Fremont CA 94539

Post Office Address:

47636 Pima Street, Fremont CA 94539

Citizenship:

India

Full name of inventor:

ARVIND KAMATH

Date 7/7/03

Residence:

Post Office Address:

Citizenship:

Arvind Kamath



Inventor's signature

32 Tyrella Court, Mountain View CA 94043

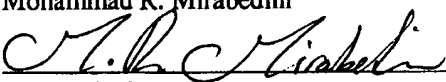
32 Tyrella Court, Mountain View CA 94043

India

Full name of inventor:

Mohammad R. Mirabedini

7/7/03
Date


Inventor's signature

Residence:

884 Boardwalk Place, Redwood City CA 94065

Post Office Address:

884 Boardwalk Place, Redwood City CA 94065

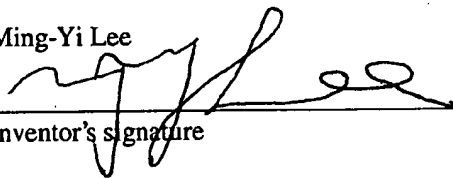
Citizenship:

Iran

Full name of inventor:

7/3/2003
Date

Ming-Yi Lee


Inventor's signature

Residence:

Post Office Address:

Citizenship:

693 Nodaway Avenue, Fremont CA 94539

693 Nodaway Avenue, Fremont CA 94539

Taiwan

52 43

Full name of inventor:

Brian A. Baylis

7/3/03
Date

Brian Baylis
Inventor's signature

Residence:

3034 SE 24th Terrace, Gresham OR 97080

Post Office Address:

3034 SE 24th Terrace, Gresham OR 97080

Citizenship:

United States of America